

AMENDMENTS TO THE TITLE

Please replace the Title of the present application
5 by "Back Light Unit Including a Diffuser with Various
Diffusion Effects".



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5 Applicant: Chung-Kuang Wei Examiner: ROY, SIKHA
 Filing Date: 10/01/2002 Art Unit: 2879
 App. No.: 10/065,289 Docket No.: CMOP0010USA

 Title: BACK LIGHT UNIT

10

 To: Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

15 Subject: Response to the Office action dated
 11/18/2003

 Dear Sir or Madame:

20

INTRODUCTORY COMMENTS

 In response to the Office action identified above,
 the above-identified application is to be amended as
25 indicated in the following sections. Consideration of
 all amendments is politely requested.

2879

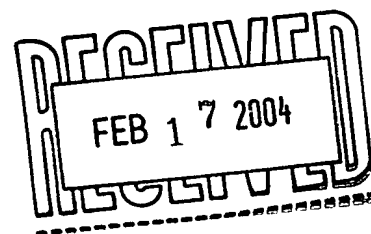
41
HP LaserJet 3330

41.526 WINSTON HSU
8064986673
9-Feb-2004 17:54



Fax Call Report

Job	Date	Time	Type	Identification	Duration	Pages	Result
941	9/ 2/2004	17:49:15	Send	00217038729318	4:53	23	OK





NORTH AMERICA INTERNATIONAL PATENT OFFICE

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

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FAX TO : ROY, SIKHA

ART UNIT: 2879

Tel : (703) 308-2826

Fax: (703) 872-9318

FROM : Winston Hsu, PATENT AGENT, REG. NO. : 41,526

SUBJECT: SERIAL NO. : 10/065,289

RESPONSE TO OFFICE ACTION MAILED ON 11/18/2003

TOTAL PAGES: 23 PAGES (INCLUDING COVER PAGE)

**The hardcopy of this response will be sent to USPTO by Federal Express
right away.**

Winston Hsu 2004/02/09



PTO/SB/97 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
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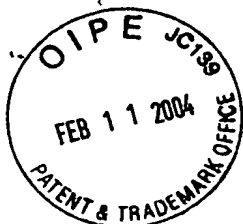
Note: Each paper must have its own certificate of transmission, or this certificate must identify
each submitted paper.

APPLICATION NUMBER: 10/065,289

PAPERS INCLUDED:

(1) Transmittal Form	1 PAGE
(2) Fee Transmittal	1 PAGE
(3) Response to the Office Action	15 PAGES
(4) Drawing	4 PAGES

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/21 (08-03)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/065,289	
	Filing Date	10/01/2002	
	First Named Inventor	Chung-Kuang Wei	
	Art Unit	2879	
	Examiner Name	ROY, SIKHA	
Total Number of Pages in This Submission	21	Attorney Docket Number	CMOP0010USA

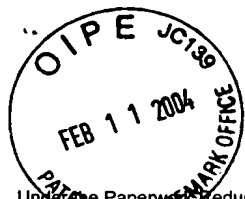
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Response to the office action has been sent to the examiner by fax on 02/09/2004	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Winston Hsu, Reg. No.: 41,526
Signature	
Date	10/12/2004

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Signature		Date

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number	10/065,289
Filing Date	10/01/2002
First Named Inventor	Chung-Kuang Wei
Examiner Name	ROY, SIKHA
Art Unit	2879
Attorney Docket No.	CMOP0010USA

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 50-0801
Deposit Account Name: North America International Patent Office

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims		Fee from below		Fee Paid
Total Claims	<input type="text"/>	-20** =	<input type="text"/>	X	<input type="text"/>	
Independent Claims	<input type="text"/>	- 3** =	<input type="text"/>	X	<input type="text"/>	<input type="text"/>
Multiple Dependent					<input type="text"/>	<input type="text"/>

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0.00

SUBMITTED BY

Name (Print/Type)	Winston Hsu	Registration No. (Attorney/Agent)	41,526	Telephone	886289237350
Signature	<i>Winston Hsu</i>	Date	2/9/2004		

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